

Department of Homeland Security U. S. Coast Guard CG -5489A (Rev. 3/03)		PERSRU'S ENDORSEMENT OF WAIVER/REMISSION APPLICATION	
APPLICANT IDENTIFICATION			
1. Name (Last, First, M. I.)		2. EMPLID	3. Rank/Rate
4. Date of Separation			
5. Ship/Station/Unit (including mailing address)			
	YES	NO	(Check appropriate block)
6.	<input type="checkbox"/>	<input type="checkbox"/>	Has validity of debt or erroneous payment been verified?
7.	<input type="checkbox"/>	<input type="checkbox"/>	Does member's pay account reflect the indebtedness as described?
8.	<input type="checkbox"/>	<input type="checkbox"/>	Does member request consideration based on financial hardship? (If yes, is financial statement attached? <input type="checkbox"/> Yes <input type="checkbox"/> No)
9. Provide an analysis of how amount of debt was determined. Identify specific items of pay/allowances, monthly rates and inclusive dates. Indicate any entitlements or credits used to offset debt (e.g., BAH (wo) vice BAH (w)). Attach a copy of LESs if not provided by member for the period of overpayment.			

Continued on reverse→

10. Furnish a complete explanation of the reason the debt occurred (e.g., administrative error, regulation change, incomplete/erroneous documents, etc.).

11. Do you think the member knew or should have reasonably been aware of this debt before the notification date? If yes, specify actions the member could have taken to report and/or correct the situation(s) leading to the debt. If the member did take action to report and/or correct the situation(s) leading to the debt prior to notification, why was corrective action not taken at that time (e.g., explain why PMIS documents not submitted timely, identify improper procedures, etc.).

Signature

Name and Title

Rank/Rate

Date